



CITY OF TUCSON DEVELOPMENT SERVICES DEPARTMENT

**COMMUNITY DESIGN REVIEW COMMITTEE
APPLICATION**

Case Number: _____

Transmittal Date: _____

Project Type:

- ☐ Tentative Plat (TP)
☐ Final Plat (FP)
☐ Development Plan (DP)
☐ Minor Subdivision
☐ Residential Cluster Project (RCP)
☐ Condominium
☐ Record Of Survey
(Check all applicable)

Project Location Map

APPLICANT/CONSULTANT:

Name: _____

Company: _____

Address: _____

City/State/Zip: _____

Phone: _____ Fax: _____ E-Mail: _____

OWNER:

Name: _____

Company: _____

Address: _____

City/State/Zip: _____

Phone: _____ Fax: _____ E-Mail: _____

PROPERTY INFORMATION:

ASSESSORS PARCEL: _____ **WARD:** _____

Project Name: _____

Location: _____
(Address Or Nearest Cross Streets)

No. Of Lots/Residential Units: _____ Gross Lot Area: _____ (ACRES)

Land Use: _____ Gross Floor Area: _____

Existing Zoning: _____ Proposed Zoning: _____

Section: _____ Township: _____ Range: _____

ASSOCIATED CASE NUMBERS:

CDRC: _____ REZONING: _____ BOARD OF ADJUSTMENT: _____

LOT DEVELOPMENT OPTION: _____ OTHER: _____

OVERLAY ZONES: ☐ LANDFILL ORDINANCE (Block Plat, Annexation, Specific Plan)
☐ AIRPORT ENVIRONS ☐ FLOODPLAIN ☐ GATEWAY ROUTE ☐ HILLSIDE DEVELOPMENT
☐ HISTORIC DISTRICT ☐ SCENIC ROUTE ☐ NEIGHBORHOOD/AREA PLAN _____
☐ WASH ☐ ENVIRONMENTAL RESOURCE ZONE (PLAN NAME)

Has neighborhood contact been made? Yes _____ No _____

If yes, documentation of that contact must be attached. If no, and notification is required, application may not be acceptable. Please contact the Planning Department at 791-4505 for determination.

DSD PRESUBMITTAL CONFERENCE DATE:
(Please fill-in the date of the conference attended:)

DATE: _____

SEWER OR SEPTIC INFORMATION:
Is This Septic? YES ____ NO ____
If septic, please include an additional plan for DEQ review.

SIGNATURES:

I CERTIFY THAT ALL INFORMATION CONTAINED ON THIS APPLICATION IS COMPLETE AND TRUE TO THE BEST OF MY KNOWLEDGE:

OWNER/APPLICANT: _____ DATE: _____

This application is to be filed at the City of Tucson Development Services Department, 201 N. Stone Avenue, Tucson, Arizona. Please submit a complete, accurate, and legible application accompanied by the appropriate plans, documentation, and fees. Fees information is in the Development Standards, Section No. 1-05.0. Submittal requirements can be found in the Development Standards Sections 2-03.3.0 and 2-05.3.0. Make your check payable to the "City of Tucson."

LAND USE CATEGORIES

Please Choose from the options listed below. Complete a breakdown according to acreage, square footage (pad area) and number of units for **EACH USE**.

COMMERCIAL

Office	Retail
Automotive	Day Care
Golf Course	Contractor Yard
Restaurant	Recreational Facility
Mini Storage	Utilities
Animal Care	Cemetery
Resort	Financial Service
Church	Other _____

INDUSTRIAL

Warehouse	Factory
Gravel Pit	Industrial Subdivision
Other _____	

INSTITUTIONAL

School	Hospital
Government Agencies	
Other _____	

RESIDENTIAL

Apartments	MH Park
Condominiums	RV Park
Single Family Attached	Single Family Detached
Other _____	

OTHER (EXPLAIN) _____

